

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

LANCMAN FOR CONGRESS

ADDRESS (number and street)

76 -21 172ND STREET

Check if different
than previously
reported. (ACC)

FRESH MEADOWS

NY

11366

2. FEC IDENTIFICATION NUMBER ▼

C

C00511923

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2015

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Stephanie Goldstone

Signature of Treasurer

Stephanie Goldstone

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LANCMAN FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	25279.00	50959.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	25279.00	45959.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8636.07	12968.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8636.07	12968.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5610.09	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	263590.98	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 24

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

LANCMAN FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

24999.00

45499.00

(ii) Unitemized.....

280.00

5460.00

(iii) TOTAL of contributions from individuals ▶

25279.00

50959.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

25279.00

50959.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

25279.00

50959.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 24

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8636.07	12968.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	33000.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	33000.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5000.00
21. OTHER DISBURSEMENTS	83.60	83.60
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41719.67	53051.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	22050.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25279.00
25. SUBTOTAL (add Line 23 and Line 24).....	47329.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41719.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5610.09

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 24

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

John L. Acierno

Mailing Address 235 E. 73rd Street

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Executive Transportation

Occupation

CEO

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11AI.5591

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

Full Name (Last, First, Middle Initial)

Joseph S. Aracri

Mailing Address 5 Sills Gully Road

City

Shoreham

State

NY

Zip Code

11786

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11AI.5589

Amount of Each Receipt this Period

500.00

2012 Primary Debt

Full Name (Last, First, Middle Initial)

Meir Babaev

Mailing Address 8046 Kent Street

City

Jamaica Estates

State

NY

Zip Code

11432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Babaev Group

Occupation

Managing Member

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		03		2015

Transaction ID : SA11AI.5599

Amount of Each Receipt this Period

2500.00

2012 Primary Debt

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 24

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Wayne I. Baden

Mailing Address 26 Broadway

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11AI.5585

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

Full Name (Last, First, Middle Initial)

Charles E. Callahan

Mailing Address 9 Arleigh Road

City

Douglaston

State

NY

Zip Code

11363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plaza College

Occupation

President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.5613

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

Full Name (Last, First, Middle Initial)

Charles E. Callahan

Mailing Address 9 Arleigh Road

City

Douglaston

State

NY

Zip Code

11363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plaza College

Occupation

President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.5615

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Elizabeth Callahan

Mailing Address 9 Arleigh Road

City

Douglaston

State

NY

Zip Code

11363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plaza College

Occupation

VP

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.5610

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

Full Name (Last, First, Middle Initial)

Charles E. Callahan, III

Mailing Address 7409 37th Ave

City

Jackson Heights

State

NY

Zip Code

11372-6300

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plaza College

Occupation

Provost

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.5609

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

Full Name (Last, First, Middle Initial)

Charles E. Callahan, III

Mailing Address 7409 37th Ave

City

Jackson Heights

State

NY

Zip Code

11372-6300

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plaza College

Occupation

Provost

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.5612

Amount of Each Receipt this Period

1000.00

2012 Primary Debt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Diana Clemente		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2015	
Mailing Address INFORMATION REQUESTED		Transaction ID : SA11AI.5579	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		C	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) B. Binah Miller Englander		Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2015	
Mailing Address 14 Sealy Drive		Transaction ID : SA11AI.5577	
City	State	Zip Code	
Lawrence		NY 11559	
FEC ID number of contributing federal political committee.		C	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
Full Name (Last, First, Middle Initial) C. Yael M. Englander		Date of Receipt M M / D D / Y Y Y Y Y 04 / 07 / 2015	
Mailing Address Information Requested		Transaction ID : SA11AI.5559	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		C	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
SUBTOTAL of Receipts This Page (optional).....		5500.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Leon Goldenberg		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2015	
Mailing Address 1360 E 14th St Ste 101		Transaction ID : SA11AI.5598	
City Brooklyn	State NY	Zip Code 11230-5961	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 999.00	
Name of Employer Goldmont Realty Corp	Occupation Real Estate		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 999.00		
B. Full Name (Last, First, Middle Initial) Ira Goldstein		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2015	
Mailing Address 205-66 Brian Crescent, 2nd Floor		Transaction ID : SA11AI.5581	
City Bayside	State NY	Zip Code 11360	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Black Care Assistance Corp	Occupation COO		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		
C. Full Name (Last, First, Middle Initial) Robert Goodman		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2015	
Mailing Address 1523 45th St.		Transaction ID : SA11AI.5637	
City Brooklyn	State NY	Zip Code 11219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		2749.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Sidney Greenberger		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		03		2015
M M	/	D D	/	Y Y Y Y									
06		03		2015									
Mailing Address 971 E. 24th Street		Transaction ID : SA11AI.5605											
City Brooklyn	State NY	Zip Code 11210											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00									
250.00													
Name of Employer Arista Healthcare Services	Occupation CEO	2012 Primary Debt <table border="1"> <tr> <td></td> </tr> </table>											
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00											
250.00													

B. Full Name (Last, First, Middle Initial) Berj Haroutunian		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		30		2015
M M	/	D D	/	Y Y Y Y									
04		30		2015									
Mailing Address 2540 Shore Blvd. Apt. 7K		Transaction ID : SA11AI.5583											
City Astoria	State NY	Zip Code 11102											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table>		1500.00									
1500.00													
Name of Employer Transportation Inc.	Occupation President	2012 Primary Debt <table border="1"> <tr> <td></td> </tr> </table>											
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00											
1500.00													

C. Full Name (Last, First, Middle Initial) Jacob Herskovits		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		03		2015
M M	/	D D	/	Y Y Y Y									
06		03		2015									
Mailing Address 1247 48th Street		Transaction ID : SA11AI.5601											
City Brooklyn	State NY	Zip Code 11219											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00									
250.00													
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	2012 Primary Debt <table border="1"> <tr> <td></td> </tr> </table>											
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00											
250.00													

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00
2000.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Martin Kirzner		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 1082 East 23rd St.		Transaction ID : SA11AI.5631
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sharp Mgmt Co.	Occupation Real Estate Mgmt	Earmarked through Democracy Engine (Debt)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Eli Levitin		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 1222 E. 22nd Street		Transaction ID : SA11AI.5607
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	2012 Primary Debt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Michael Lipman		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 11210 Real Estate Mgr		Transaction ID : SA11AI.5625
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Rdata Realty	Occupation Real Estate Mgr	Earmarked through Democracy Engine (Debt)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 24

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Roberta C. Pike			Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2015	
Mailing Address 2399 Surf Drive			Transaction ID : SA11AI.5595	
City	State	Zip Code		
Bellmore	NY	11710		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED			Occupation INFORMATION REQUESTED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 250.00	
B. Full Name (Last, First, Middle Initial) George Potter			Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2015	
Mailing Address 235 Mamaroneck Road			Transaction ID : SA11AI.5587	
City	State	Zip Code		
Scarsdale	NY	10583		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer INFORMATION REQUESTED			Occupation INFORMATION REQUESTED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 1000.00	
C. Full Name (Last, First, Middle Initial) Carl Schmitt			Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2015	
Mailing Address 1020 Arbor Way			Transaction ID : SA11AI.5593	
City	State	Zip Code		
Newtown Squire	PA	19073		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1500.00	
Name of Employer INFORMATION REQUESTED			Occupation INFORMATION REQUESTED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 1500.00	
SUBTOTAL of Receipts This Page (optional).....			2750.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 24

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Joseph Segel			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2015		
Mailing Address 3156 Bedford Avenue			Transaction ID : SA11AI.5603		
City Brooklyn	State NY	Zip Code 11210	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		2012 Primary Debt			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED			
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
B. Full Name (Last, First, Middle Initial) Larry Spiewak			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 05 / 2015		
Mailing Address 4101 Glenwood St.			Transaction ID : SA11AI.5627		
City Brooklyn	State NY	Zip Code 11210	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Earmarked through Democracy Engine (Debt)			
Name of Employer Kwik Ticket		Occupation Owner			
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
C. Full Name (Last, First, Middle Initial) Ralph Treitel			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2015		
Mailing Address 3512 Quentin Rd.			Transaction ID : SA11AI.5623		
City Brooklyn	State NY	Zip Code 11234	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Earmarked through Democracy Engine (Debt)			
Name of Employer CHE Psychological Services		Occupation Administrator			
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
SUBTOTAL of Receipts This Page (optional).....			750.00		
TOTAL This Period (last page this line number only).....					

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 24

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Sol Werdiger

Mailing Address PO Box 1506

City

Rahway

State

NY

Zip Code

07065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Outerstuff

Occupation

CEO

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		05		2015

Transaction ID : SA11AI.5633

Amount of Each Receipt this Period

500.00

Earmarked through Democracy Engine (Debt)

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

24999.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 24

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEMOCRACY ENGINE, INC., PAC

Mailing Address 850 QUINCY STREET, NW #402

City State Zip Code
 WASHINGTON DC 20011

FEC ID number of contributing
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

05 / **05** / **2015**

Transaction ID : SA11C.5645

Amount of Each Receipt this Period

1780.00

Debt

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DEMOCRACY ENGINE, INC., PAC

Mailing Address 850 QUINCY STREET, NW #402

City State Zip Code
 WASHINGTON DC 20011

FEC ID number of contributing
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

05 / **26** / **2015**

Transaction ID : SA11C.5643

Amount of Each Receipt this Period

250.00

Debt

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

0.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 24

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RORY LANCMAN

Mailing Address 76-21 172ND STREET

City	State	Zip Code
FRESH MEADOWS	NY	11366

Purpose of Disbursement
Loan repayment

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 06

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
04 / 13 / 2015

Amount of Each Disbursement this Period

8000.00

Transaction ID : SB19A.5574

B. RORY LANCMAN

Mailing Address 76-21 172ND STREET

City	State	Zip Code
FRESH MEADOWS	NY	11366

Purpose of Disbursement
Loan repayment

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 06

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
04 / 22 / 2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB19A.5575

C. RORY LANCMAN

Mailing Address 76-21 172ND STREET

City	State	Zip Code
FRESH MEADOWS	NY	11366

Purpose of Disbursement
Loan repayment

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 06

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
05 / 04 / 2015

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB19A.5576

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

23000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 24

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RORY LANCMAN

Mailing Address 76-21 172ND STREET

City	State	Zip Code
FRESH MEADOWS	NY	11366

Purpose of Disbursement
Loan repayment

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 06

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 27 / 2015

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB19A.5617

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10000.00

33000.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 19 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4511

LANCMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RORY LANCMAN

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

76-21 172ND STREET

City

State

ZIP Code

FRESH MEADOWS

NY

11366

Original Amount of Loan

50000.00

Cumulative Payment To Date

30000.00

Balance Outstanding at Close of This Period

20000.00

TERMS

Date Incurred

M M / D D / Y Y
03 / 31 / 2012

Date Due

M M / D D / Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 20 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4966

LANCMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RORY LANCMAN

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

76-21 172ND STREET

City

State

ZIP Code

FRESH MEADOWS

NY

11366

Original Amount of Loan

10000.00

Cumulative Payment To Date

10000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 04 / 2012

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 24

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4967

LANCMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RORY LANCMAN

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

76-21 172ND STREET

City

State

ZIP Code

FRESH MEADOWS

NY

11366

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 06 / 2012

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

30000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4970

LANCMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RORY LANCMAN

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

76-21 172ND STREET

City

State

ZIP Code

FRESH MEADOWS

NY

11366

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 06 / 2012

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

60000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5332

LANCMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RORY LANCMAN

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

76-21 172ND STREET

City

State

ZIP Code

FRESH MEADOWS

NY

11366

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 26 / 2012

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

160000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 OF 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LANCMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stroock & Stroock & Levan LLP

Nature of Debt (Purpose):

Legal services and expenses

Mailing Address 180 Maiden Ln
34City State Zip Code
New York NY 10038-4925

Outstanding Balance Beginning This Period

87590.98

Transaction ID : SD10.5355

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

87590.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Working Families Party

Nature of Debt (Purpose):

Field Operation: Canvassing

Mailing Address 2 Nevins St
FL 3City State Zip Code
Brooklyn NY 11217-1010

Outstanding Balance Beginning This Period

24500.00

Transaction ID : SD10.5361

Amount Incurred This Period

0.00

Payment This Period

8500.00

Outstanding Balance at Close of This Period

16000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

103590.98

2) **TOTALS** This Period (last page this line number only) ▶

103590.98

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

160000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

263590.98